

“Web Enhancements to the Medicare Prescription Drug Plan Finder and Medicare Options Compare”

CMS is enhancing the Medicare Prescription Drug Plan Finder, and we’re re-launching the “Medicare Personal Plan Finder” as “Medicare Options Compare.”

On October 12, 2006 you will be able to compare Medicare drug plan and health plan options easier.

Some of the web enhancements are as follows:

Appearance

- The same data is present, it just has a cleaner look
- More streamlined navigation
- Reduced page scrolling
- Simplified text

Personal Information

- Enter personal information (such as Medicare number, date of birth) to get more personalized information about current enrollment and the options available
- Enter current drugs and get a personalized comparison of plans and benefits
- Save prescription drug information, pharmacy information, and up to 10 plans without having to re-enter that data (*available only on the Medicare Prescription Drug Plan Finder*)

View and Compare Plans

- View 2006 and 2007 plan information
- Compare out-of-pocket costs (*information re-launched in Medicare Options Compare*)
- Compare plans based on price and benefit structure
- Sort plans based on Estimated Annual Cost or narrow the search based on what is important to the user (for example, premium or drug coverage)
- Narrow plans down by state and preference, such as drug plans with no coverage gap or with low premiums (*available on the Medicare Prescription Drug Plan Finder, select “Plans in Your Area” section on the website*)
- “Plans in Your Area” replaces the landscape page from last year—streamlines the information and provides a cleaner display
- Start the Medigap comparison from the Home Page
- In the Medigap section, view Medigap policies that are offered to people under age 65

Monthly Cost Estimator (*available only on the Medicare Prescription Drug Plan Finder*)

- Displays a personalized chart outlining 12 months of a user’s expected monthly costs
- Provides users with information on how to save money on their prescription drugs (*select “Lower My Cost Share” section on the website*)

For More Information

- Call 1-800-MEDICARE (1-800-633-4227)
- TTY users should call 1-877-486-2048
- Visit www.medicare.gov and select “Frequently Asked Questions”



The Official U.S. Government Site For People with Medicare

Medicare Prescription Drug Plan Finder

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Find & Compare Plans that Cover Drugs

Search includes personalized information about:

- Medicare Prescription Drug Plans
- Medicare Health Plans (that cover drugs)

Search doesn't include:

- Medicare Health Plans (that do not cover drugs)
- Original Medicare Plan
- Medigap Policies

Find and compare these plans using the [Medicare Personal Plan Finder](#).

[Find & Compare Plans](#)

Enroll in a Medicare Prescription Drug Plan

Once you know which Medicare Prescription Drug Plan you want, use our online enrollment system to join.

Online enrollment will be available beginning November 15, 2006

View Your Current Plan

If you are already enrolled in a Medicare Prescription Drug Plan, you can view information about your plan.

[View Your Current Plan](#)

Learn More About Drug Coverage Options

If you are a Medicare beneficiary, you are eligible for Medicare prescription drug coverage, regardless of your income, health status, or current prescription expenses.

There are two types of Medicare plans that provide prescription drug coverage:

[Medicare Prescription Drug Plans](#)

These plans add prescription drug coverage to the Original Medicare Plan and certain types of Medicare Health Plans.

[Learn more >](#)

[Medicare Health Plans](#)

Some of these plans cover both health care and prescription drugs.

[Learn more >](#)

Learn More About Plans in Your Area

Access a directory of all Medicare plans with drug coverage that are available in your state or territory

Select a State or Territory



[View Plans](#)

Important Coverage Information

- [Click here if you have Military retiree benefits \(TRICARE\)](#)
- [Click here if you have Veteran benefits \(VA\)](#)
- [Click here if you have Federal employee retiree benefits \(FEHBP\)](#)

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Find and Compare Plans

Step 1: Select a Search Option

Recommended

Personalized Plan Search

The Personalized Plan Search is optimal because it provides specific information about your current enrollment as well as more tailored plan information.

Use this search if you:

- have your red, white, and blue Medicare card
- want information on your current coverage
- want details about the Medicare Prescription Drug Plans and Medicare Health Plans in your area

[Begin Personalized Search](#)

By clicking on this button you are agreeing to the terms and conditions of the [User Agreement](#)

OR

General Plan Search

The General Plan Search will not give you information about your current enrollment and cannot provide tailored plan information.

Use this search if you:

- do **not** have your red, white, and blue Medicare card
- want details about the Medicare Prescription Drug Plans and Medicare Health Plans in your area

[Begin General Search](#)

By clicking on this button you are agreeing to the terms and conditions of the [User Agreement](#)


NOTE: Any information you enter on this site is secure. Medicare will not save or use any information you enter other than to provide you with accurate search results. See the [User Agreement](#) for more details.

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Find and Compare Plans

Step 2: Enter Your Medicare Insurance Information

Please enter your Medicare insurance information as it appears on your red, white, and blue card (see right). Medicare needs this information to correctly identify you and provide you with accurate search results. Medicare will not save or use this information for any other purpose. See the [User Agreement](#) for more details.

If you don't have your card or you don't want to enter the information on it, [click here](#).

Medicare Claim Number: - - - (Appears on your Medicare card – see example right)
RRB Beneficiaries, enter your Medicare Claim Number [here](#).

Enter one of the following from your Medicare card:
Effective Date for Part A: Month Year
 OR
Effective Date for Part B: Month Year

Last Name:
Date of Birth: Month Day Year
ZIP Code: [ZIP Code Locator](#) (Please use the ZIP Code that we currently have on record for you)

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Find and Compare Plans

Step 3: Review Current Coverage and Consider Options

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You are currently enrolled in:

- Original Medicare Plan**
 - Provides health coverage only (you can add drug coverage by joining a Medicare Prescription Drug Plan)
 - For more information, call 1-800-MEDICARE (1-800-633-4227)

You have the following options if you want to change plans:

- Join a Medicare Health Plan (like an HMO or PPO). You would get all of your health care, including prescription drug coverage if offered, through these types of plans. Or,
- enroll in a Medigap Policy and still be in Original Medicare

If you decide to change plans, keep in mind the following:

- You can change plans under certain circumstances:**
 - You can switch plans from November 15 through December 31 of every year.
 - In special circumstances, Medicare may give you an opportunity to switch to another plan. For example, if you permanently move out of your plan's service area; if you qualify for extra help paying for prescription drugs; or if you enter, live in, or leave a nursing home.
 - If you are eligible for a Medicare Advantage Plan you can join or switch Medicare Advantage Plans from January 1 to March 31 of every year, but you can't join or drop Medicare prescription drug coverage during this time. For instance, if you are in a Medicare Advantage Plan with prescription drug coverage, you could return to the Original Medicare Plan but you'd have to also join a Medicare Prescription Drug Plan at the same time.

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Learn More

- [Learn more about the Original Medicare Plan](#)
- [Learn more about Medigap Policies](#)
- [Learn more about Medicare Health Plans](#)
- [Learn how to choose a plan](#)

Limited Income and Resources?

You may qualify for extra help paying for Medicare prescription drug coverage.

[Find out more](#)

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Find and Compare Plans

Decide If You Want to Get Drug Costs for Your Plans

Get Drug Costs for Available Plans

To provide you with estimated drug costs, we need to know which drugs you are currently taking, including their quantities and dosages.

Select one of the following options:

1. I have not yet entered my drugs on this Web site

Enter My Drugs

2. I entered my drugs on a previous visit to this Web site and would like to retrieve my saved drug list now.

Drug List ID:

Password Date:

Retrieve My Drug List

OR

Show Me Available Plans Without Drug Costs

Click "Continue" below if you do not wish to enter the drugs you are currently taking, including their quantities and dosages. Drug cost estimates will not be included in the plan information.

Continue to Plan List

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Find and Compare Plans

Find and Enter Your Drug Information

You can search and add your drugs by entering them below and clicking the "Search for Drug" button or by searching for the drug alphabetically.

Enter Drug Name:

Search for Drug

[Click here to browse drugs alphabetically](#)

Why Enter My Drugs?

By entering your drugs, we can estimate what portion of your drug costs Medicare will pay.

My Drug & Pharmacy List

Save My Drug & Pharmacy List

Add More Drugs

Drug Name	Lower Cost Generic	Actions
ACEPROMAZINE MALEATE	Already generic	Remove
Ambien	Generic not available	Remove
Aquachloral	Generic not available	Remove

☒ Use lower cost generic drugs when available. ([What does this mean?](#))

What Drugs Should I Enter?


Medicare plans cover most commonly used prescription drugs. In addition, some plans may provide additional coverage for drugs not usually covered by Medicare.

This site does not show pricing for over-the-counter drugs.

[Continue >](#)

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Find and Compare Plans

Review Your Drug Dosages and Quantities

Review the dosage and quantity information displayed below for each of your drugs and update if necessary. If you take more than one dose of the same drug, click "Add Doses."

Note that if you change the strength of a drug using a dropdown menu in the "Drug Name" column, you then need to make sure the information in the "Quantity & Days Supply" column is still correct.

My Drug List

Drug Name	Quantity/Days Supply	Actions
ACEPROMAZINE MALEATE POW MALEATE	50 GM BOTTLE 1 Per Month	<button>Remove</button>
<div>Ambien TAB 10MG</div>	30 Per Month	<button>Add Doses</button> <button>Remove</button>
<div>Aquachloral SUP 325MG</div>	12 EA BOX 1 Per Month	<button>Add Doses</button> <button>Remove</button>

Save My Drug List

Add More Drugs

Back

Continue

What Days Supply Should I Enter?

By default, we calculate drug costs on a monthly basis. Therefore, if there are drugs listed at left that you buy less frequently than once a month, update the "Per Month" dropdown menu.


Note: Drugs that you order by mail or online must be calculated on a monthly basis.

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Find and Compare Plans

Save Your Drug & Pharmacy List (Optional)

Congratulations, you've saved your drug and pharmacy list! You can update your list at any time.

When you wish to calculate the drug costs for more plans in the future, you can retrieve your saved drug and pharmacy list by entering the information displayed below. Either print this page or write down this information so that you have it handy for future use.

Your Drug List Retrieval Information

Drug List ID:	6677889910234
Security Password Date:	January 1, 1900

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Find and Compare Plans

Your Personalized Plan List

[Print This Page](#)

48 Medicare Prescription Drug Plans in ZIP code 21014 [\[View 19 Medicare Health Plans in ZIP code 21014\]](#)

Click on column titles to sort. Click on plan names to view more information about each plan. If you're interested in any plans but not ready to make a decision, click "Add" to put the plan in a list of Your Favorite Plans so you can save them for later.

Note that 2007 plan data is displayed by default. [Click here to display 2006 plan data.](#)

Choose up to 3 plans to [Compare](#)

	Plan Name and ID Numbers	Estimated Annual Cost	Monthly Drug Premium	Annual Deductible	Coverage in the Gap	Number of Network Pharmacies	Favorites	Enroll
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Your Current Plan

<input type="checkbox"/>	Humana PDP Standard \$5884-063 Humana, Inc. (S5884-063)	\$1,733 Lower this cost	\$6.44	\$250	No	12	Current Plan	Current Plan
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Your Favorite Plans (3)

<input type="checkbox"/>	Humana PDP Enhanced \$5884-004 Humana, Inc. (S5884-004)	\$1,783 Lower this cost	\$12.58	\$0	No	12	Remove	Enroll
<input type="checkbox"/>	CIGNA Rx Plus Plan CIGNA HealthCare (S5617-025)	\$1,870 Lower this cost	\$41.98	\$0	No	15	Remove	Enroll
<input type="checkbox"/>	Aetna Medicare Rx Essentials Aetna Medicare (S5810-039)	\$1,903 Lower this cost	\$32.13	\$250	No	13	Remove	Enroll

Other Plans in Your Area (44)

<input type="checkbox"/>	Elder Health PDP Mid-Atlantic Elder Health PDP Mid-Atlantic (S5822-001)	\$1,432 Lower this cost	\$29.40	\$250	No	23	Add	Enroll
<input type="checkbox"/>	PacifiCare Saver United HealthCare (S5822-001)	\$1,654 Lower this cost	\$29.40	\$250	No	2	Add	Enroll
<input type="checkbox"/>	Aetna Value Rx Aetna Medicare (S5822-001)	\$1,812 Lower this cost	\$29.40	\$250	No	12	Add	Enroll

Choose up to 3 plans to [Compare](#)

The drug costs displayed above are estimates based on your current drug use and preferred pharmacies. These estimates may vary based on the specific quantity, strength, and/or dosage of each medication, the order in which you purchase your prescriptions, and the pharmacy you use. You may wish to revise your Drug & Pharmacy List below in order to get the most accurate cost estimates.

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Find and Compare Plans

Plan Details

Print This Page

This page provides a summary of the costs and details associated with this plan’s drug coverage. The drug costs displayed are estimates based on your current drug use and pharmacy preference.

These estimates may vary based on the specific quantity, strength and/or dosage of the medication, the order in which you purchase your prescriptions, and the pharmacy you use. But it also is important to look beyond your current needs at the insurance value of Medicare prescription drug coverage. Enrolling now gives you peace of mind because the coverage will be there even if your drug needs become more significant in the future. And any time you spend out-of-pocket more than \$3,600 in a year, Medicare will pay almost all of your remaining drug costs.

Note that 2007 plan data is displayed by default. [Click here to display 2006 plan data.](#)

Humana PDP Standard Plan (S5884–063)

General Plan Information

- Medicare Prescription Drug Plan
- Adds drug coverage to the Original Medicare Plan (and some Medicare Cost and Medicare Private Fee-for-Service plans)
- Approved by Medicare
- Mail Order Availability: Yes
- [View plan formulary](#)
- [View pharmacy network](#)
- [View important notes](#)
- [Lower my cost share](#)

Add to My Favorites

Online enrollment will be available beginning November 15, 2006

Contact Information

500 West Main Street, Louisville, KY 40202

Members

1-800-706-0872
1-877-833-4486 (TTY/TDD)
Customer@humana.com

Non-Members

1-800-706-0872
1-877-833-4486 (TTY/TDD)
Customer@humana.com

[View plan website](#)

Drug List Retrieval Info

Drug List ID:
6677889910234
Security Password Date:
January 1, 1900

Related Tools

[Medicare Personal Plan Finder](#)

Use this tool if you want to start over and compare Medicare Health Plans or Medigap Policies. These plans offer health and hospitalization coverage. Some of these plans also offer drug coverage.

Fixed Costs

Premium	\$31.12 per month (\$373.44 per year)
Annual Deductible	\$250.00

Note: You selected 2 preferred pharmacies. The information displayed below is for Walgreen's Pharmacy. [Click here to see information for CVS](#)

Annual Drug Costs (Including Premium) for Retail Pharmacy vs. Mail Order

Annual Drug Costs if you use a Retail Pharmacy	\$2,766.00 (Walgreen's Pharmacy)
Annual Drug Costs if you use Mail Order	\$2,532.00

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Drug Cost Details at Walgreen's Pharmacy + -					
Selected Drugs	Full Cost of Drug (The discounted cost of drug offered by the plan)	Deductible (The amount you will pay before your total drug costs reach \$250)	Initial Coverage Level (The amount you will pay before your total drug costs reach \$2,250)	Gap (The amount you will pay after you reach \$2,250 in full drug costs, but before you reach \$3,600 in out-of-pocket costs)	Catastrophic (The amount you will pay after you reach \$3,600 in out-of-pocket costs)
ACEPROMAZINE MALEATE POW MALEATE	\$210.00	\$106.08	\$106.08	\$106.08	\$106.08
Ambien TAB 10MG	\$120.65	\$63.07	\$63.07	\$63.07	\$63.07
Aquachloral SUP 325MG	\$140.19	\$140.19	\$140.19	\$140.19	\$140.19
Monthly Totals:	\$470.84	\$309.34	\$309.34	\$309.34	\$309.34
<div>Add or Remove Drugs</div> <div>Update Dosage/Quantity</div>					

Note: Your actual costs at this pharmacy may vary slightly

Drug Cost Details at Mail Order Pharmacy + -

My Drugs					
Drug Name	Lower Cost Generic			Actions	
ACEPROMAZINE MALEATE POW MALEATE	50 GM BOTTLE	1	Per Month	Remove	
Ambien TAB 10MG		30	Per Month	Add Doses	Remove
Aquachloral SUP 325MG	12 EA BOX	1	Per Month	Add Doses	Remove
Add More Drugs					

My Pharmacies		
Pharmacy	Network Status	Remove
Walgreen's Pharmacy 606 Hoagie Drive, Bel Air, MD 21014 - (410) 879-5643	Preferred Network Pharmacy	Remove
CVS Pharmacy 1510 Conowingo Road, Bel Air, MD 21014 - (410) 879-5434	Preferred Network Pharmacy	Remove
Change Pharmacy Selections		



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Find and Compare Plans

Compare the Plans That You Selected

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The drug costs displayed here are estimates based on your current drug use and preferred pharmacies. These estimates may vary based on the specific quantity, strength, and/or dosage of each medication, the order in which you purchase your prescriptions, and the pharmacy you use.

[Click here to update your Drug & Pharmacy List](#)

Note that 2007 plan data is displayed by default. [Click here to display 2006 plan data.](#)

	Humana PDP Standard (S5884-063)	Humana PDP Enhanced (S5884-004)	Medicare Rx Rewards (S5960-005)
	Add to My Favorites Online enrollment will be available beginning November 15, 2006 More Information Go	Add to My Favorites Online enrollment will be available beginning November 15, 2006 More Information Go	Add to My Favorites Online enrollment will be available beginning November 15, 2006 More Information Go
<input type="checkbox"/> Cost Summary			
Total Annual Drug Costs	\$1,180	\$1,180	\$2,075
Monthly Drug Premium	\$10.80	\$10.00	\$38.53
Annual Deductible	\$250.00	\$250.00	\$250.00
<input type="checkbox"/> Monthly Drug Costs (After deductible is met but before total annual drug costs reach initial coverage limit)			
ACEPROMAZINE MALEATE POW MALEATE	\$14.04	\$14.04	\$337.86
Ambien TAB 10MG	\$25.28	\$25.28	\$22.92
Aquachloral SUP 325MG	\$8.15	\$8.15	\$8.03
Total Monthly Cost	\$47.47	\$47.47	\$368.81
<input type="checkbox"/> Monthly Drug Costs (After your total drug costs reach the initial coverage limit but before your total out-of-pocket expense equals \$3,600.00)			
ACEPROMAZINE MALEATE POW MALEATE	\$56.16	\$56.16	\$337.86
Ambien TAB 10MG	\$101.10	\$101.10	\$91.68
Aquachloral SUP 325MG	\$32.60	\$32.60	\$32.10
Total Monthly Cost	\$189.86	\$189.86	\$461.64
<input type="checkbox"/> Monthly Drug Costs (After your total out-of-pocket expense equals \$3,600.00)			
ACEPROMAZINE MALEATE POW MALEATE	\$5.00	\$5.00	\$5.00
Ambien TAB 10MG	\$5.00	\$5.00	\$5.00
Aquachloral SUP 325MG	\$5.00	\$5.00	\$5.00
Total Monthly Cost	\$15.00	\$15.00	\$15.00
<input type="checkbox"/> Pharmacy & Mail Order Information			
Pharmacy Network	12 network pharmacies in your area	12 network pharmacies in your area	14 network pharmacies in your area
Mail Order Availability	Available	Available	Available

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